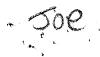
Ø 002 10/22/2008 12:57 FAX USER CHARGE SELF MONITORING REPORT OCT 22 2008 NAME Abuelito Cheese **ADDRESS** 607-609 Main street Paterson N.J. **FACILITY LOCATION** 607-609 Main street Paterson N.J. OLD OUTLET DESIGNATION: NEW CUSTOMER ID / OUTLET ID: 27220056-1 **VOLUME DISCHARGED THIS PERIOD** MONITORING PERIOD **GALLONS** 7,532 START sanitary **END** CU. FT. x 7.48 = GALLONS 09 08 01 08 09 30 10008 EFFLUENT METER READING LAST DAY THIS PERIOD YR MO DAY YR MO DAY TSS DA1 DATE BOD 461172 ... 000 1:007.0 1 2007 * X 7 . 48 = 7 2 5 3 3 - # + () · * 5008 ond Input I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance

with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL OR AUTHORIZED AGENT	TYPE NAME AND TITLE	TELEPHONE NUMBER	
Carol Play	Carol Paiz General Manager	973-345-3503	
Hard Cory	10/17/2008		

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USER CHARGE SELF MONITORING REPORT

NAME		Abuelito (Cheese				·		OCT 2 1 2000
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I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL OR AUTHORIZED AGENT	TYPE NAME AND TITLE	TELEPHONE NUMBER		
Clarol Paix	Carol Paiz General Manager	973-345-3503		
		10/17/2008		

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